

**UNITED STATES OF AMERICA
BEFORE THE NATIONAL LABOR RELATIONS BOARD
Region 19**

MULTICARE HEALTH SYSTEM d/b/a DEACONESS HOSPITAL¹

Employer

and

Case 19-RC-268298

SEIU HEALTHCARE 1199NW

Petitioner

DECISION AND DIRECTION OF ELECTION

MultiCare Health System d/b/a Deaconess Hospital (Employer) operates an acute care hospital and clinics in Spokane, Washington. SEIU Healthcare 1199NW (Petitioner) filed a petition October 29, 2020² seeking to include a voting group via an *Armour-Globe* self-determination election to its existing unit of service and maintenance employees employed at the Employer's facility (service or existing unit). The voting group sought by the Petitioner consists of all full-time, part-time, and per diem Medical Receptionists (MRs) employed in its Maternal Fetal Medicine Clinic (MFMC). There are currently 2 employees in the group sought by the Petitioner, and approximately 443 in the existing unit. The parties agreed to a mail-ballot election.

The parties stipulated, and I find that the record supports, that the MRs in the group sought by the Petitioner constitute a distinct, identifiable segment of the Employer's unrepresented employees so as to constitute an appropriate voting group, as, among other factors, these employees work in the same physical location, share the same supervision, are the only ones in this classification, and have duties that are distinct from other classifications.

Petitioner takes the position that the petitioned-for Medical Receptionists (MR) employed at the Employer's Maternal Fetal Medicine Clinic (MFMC) share a community of interest with the service employees currently represented by the Petitioner in the existing unit, which includes both inpatient and outpatient based job classifications. The Employer argues to the contrary, that the MRs do not share a sufficient community of

¹ I grant the parties' Joint Motion to have the petition and other formal documents in this matter amended to correctly reflect the names of the parties as set forth herein.

² All dates hereinafter are in 2020 unless indicated otherwise.

interest with the existing unit and would be an appropriate unit of nonprofessional employees in the MFMC.³

A videoconference hearing was held before a Hearing Officer of the National Labor Relations Board on November 23. The parties filed their respective post-hearing briefs with me after the conclusion of the hearing.⁴

Based on the record as a whole and the parties' briefs, as well as for the reasons set forth below, I find that inasmuch as the employees sought by the Petitioner comprise an identifiable, distinct segment of the workforce that shares a community of interest with the existing service unit, I have directed a self-determination election among all full-time, part-time, and per diem Medical Receptionists employed by the Employer in its Maternal Fetal Medicine Clinic. The parties stipulated to a mail-ballot election.

BACKGROUND

MultiCare Health System operates a large multi-facility network of healthcare institutions, including the Employer's acute care hospital and clinics in Spokane, Washington at issue in this matter. The Employer's Spokane "campus" consists of Deaconess Hospital (Hospital), and the Deaconess Health and Education Center (DHEC), as well as a number of medical offices and other clinics.⁵ The Hospital and the DHEC are connected by a fourth floor skybridge.⁶ The DHEC contains the Maternal Fetal Medicine Clinic (MFMC) as well as a number of other clinics and offices.

The Petitioner has represented certain employees in a unit of service and maintenance employees since 2002. At that time, the Hospital was part of Empire Health Systems, but was subsequently purchased by Community Health System in 2007, which operated the Hospital in conjunction with the Rockwood Clinic System and Valley Hospital, another acute care hospital in Spokane, under the Rockwood Health System name with each facility retaining its respective separate identity.

³ In reaching my conclusions, I do not rely on Petitioner's argument in its post-hearing brief that the Board's *Health Care Rules* 29 CFR § 103.30 providing that nonprofessionals at an acute care hospital have a presumptive community of interest with all other nonprofessionals compel inclusion of the MRs in the existing unit. Even assuming for the sake of argument this might be an appropriate consideration in this case, I do not find the record evidence sufficient to determine whether the existing unit is conforming or non-conforming, and — outside this statement on brief — the parties have not reached a stipulation on, or addressed the nature of, the Unit as it relates to the Healthcare Rule.

⁴ The videoconference hearing in this matter was heard *ad seriatum* with Case 19-RC-268341, with requests a self-determination election in another unit at this facility and is addressed in a separate decision.

⁵ Much of this background information is contained in my Decision in Case 19-UC-244614 issued September 25, 2019: I grant the parties' motion that I take administrative notice of certain facts contained therein.

⁶ The entirety of the Employer's campus consisting of the Hospital and the DHEC will collectively be referred to herein as the Employer's facility. References to only the Hospital or only the DHEC will be indicated accordingly.

In 2017, MultiCare purchased Rockwood Health System, including the Employer's facility, and the parties negotiated a new collective-bargaining agreement (Agreement) effective from December 6, 2017 through November 30, 2020 and from year to year thereafter unless modified or terminated by agreement of the parties. The Agreement extends representation to certain employees at both the Hospital and the DHEC in the existing service unit, and includes, *inter alia*, Health Unit Coordinator; Medical Secretary; Secretary II- Perinatal Outpatient; Secretary II – Perinatal Ultrasound; Medical Assistant; Patient Access Representative, and Surgical Scheduler.⁷ Most employees working at the DHEC, however, have been historically excluded from the Unit.⁸

The MFMC was operated by an outside entity called Mednax until November 2019 when the Employer acquired it and took over its operation. As noted above, the MFMC is physically located on the third floor of the DHEC in a separate structure adjacent to the Hospital's main building and the two are connected by a skywalk. The MFMC does not provide services to Hospital inpatients but caters only to outpatient referrals from primary providers. If a patient who receives services at the MFMC is subsequently hospitalized at the Employer's hospital, which happens frequently, the records (charting, lab notes, and test results) generated at the MFMC are available to the Hospital staff through the Epic electronic charting system commonly used by the Employer. Likewise, if a hospital patient is subsequently referred as an outpatient to the MFMC, the Hospital's records would be available through the same system. A hospital patient cannot be seen at the MFMC until discharged from the hospital, however.

The MFMC currently consists of nine employees: the two medical receptionists (MRs) sought by the Petitioner; four Registered Nurses (RNs); a diabetes educator; and three Perinatal Ultrasound Techs. There is one physician (not employed directly by the Employer) who works in the MFMC and also does rounds and performs procedures at the Hospital. The MFMC employees, with the exception of the physician, do not float to any other departments in the Hospital.

The MFMC MRs schedule clinic outpatients for ultrasound appointments performed by the Perinatal Ultrasound Techs.

ANALYSIS UNDER THE *ARMOUR-GLOBE* STANDARD

Whether it is appropriate to add additional employees to a preexisting bargaining unit is a question addressed by the Board's *Armour-Globe* doctrine. *Armour & Co.*, 40 NLRB 1333 (1942), and *Globe Machine & Stamping Co.*, 3 NLRB 294 (1937). Under the *Armour-Globe* doctrine, employees sharing a community of interest with an already

⁷ The other classifications in the existing unit covered by the Agreement are set forth in Appendix A of the Agreement and are too lengthy to reiterate here.

⁸ See my decision in Case 19-UC-244614.

represented unit of employees may vote whether they wish to be included in the existing bargaining unit. *NLRB v. Raytheon Co.*, 918 F.2d 249, 251 (1st Cir. 1990). Thus, an incumbent union may petition to add unrepresented employees to its existing unit through an *Armour-Globe* election if the employees sought to be included share a community of interest with unit employees and “constitute an identifiable, distinct segment so as to constitute an appropriate voting group.” *St. Vincent Charity Medical Center*, 357 NLRB 854 (2011).

An “identifiable, distinct segment” of the workforce is one that does not unduly fragment the workforce. *Capitol Cities Broadcasting Corp.*, 194 NLRB 1063 (1972). Here, the parties stipulated that the MRs in the voting group sought constitute such an identifiable, distinct segment of the workforce and I accept that stipulation based on the record evidence.

Regarding the other factor of the *Armour-Globe* doctrine, the Board reviewed the elements of the traditional community of interest test in *PCC Structural, Inc.*, 365 NLRB No. 160, slip op at 6 (2017). As identified in *PCC*, determining the community of interest between groups of employees involves: whether the employees are organized into a separate department; have distinct skills and training; have distinct job functions and perform distinct work, including an inquiry into the amount and type of job overlap between classifications; are functionally integrated with other employees; have frequent contact and interchange with other employees; have distinct terms and conditions of employment; and are separately supervised. *Id.* at 13, citing *United Operations, Inc.* 338 NLRB 123 (2002).⁹

I find that there is sufficient record evidence to support a finding of community of interest between the employees in the existing unit and the employees in the group that the Petitioner seeks to add. The parties stipulated, and I find based on the evidence in the record, that these employees work in the same physical location and share common supervision. In addition to sharing a common facility and common supervision, the record further confirms that most of the elements set forth in *PCC Structural* discussed in further detail below are present in sufficient degree to further support my decision.

Departmental Organization

It is not disputed that the MRs work in a distinct department – the MFMC – from others in the existing unit. However, although not expressly stated in the record, it

⁹ *PCC Structural, supra*, involves an election for a stand-alone unit where the question is whether the employees in the proposed unit share interests sufficiently separate and distinct from those in the remainder of the workforce to constitute an appropriate unit for bargaining. The instant case seeks a self-determination election to add employees to an existing unit consistent with *St. Vincent, supra*. Thus, *PCC Structural* is relied upon herein for the Board’s current community of interest factors.

appears from the description of the existing unit that the myriad classifications contained therein are spread across various departments in the Hospital.

Moreover, the Petitioner represents other employees as part of the existing unit in the DHEC where the MFMC is located, including the Patient Access Registrars (Registrars), who perform work comparable in many respects to those of the MFMC MRs.

Thus, there is nothing inherently inconsistent with the Employer's departmental organization by having the MRs in a separate department than others already represented by Petitioner. Based thereon, I conclude that departmental organization appears to be a neutral factor in finding a community of interest.

Skills and Training

According to the job description for MFMC MR as of September 2019, responsibilities include variations of typical receptionist duties (greeting patients, answering and directing calls, scheduling, registration, charge entry, payment posting, operation of basic office equipment, and maintenance of the reception area). Job requirements include customer service skills and good judgment, as well as a pleasant and professional manner. A high school diploma or equivalent, and clerical/receptionist experience, preferably in a medical setting, is also required.

The MFMC MRs and the Hospital Registrars are both trained by the Hospital's Patient Access Director. New MFMC MR hires attend an orientation held in the DHEC which is also attended by various other Hospital employees, including nurses, dietary aides, environmental services, as well as employees in the existing unit.¹⁰ Similarly, HRO (Higher Reliability Organization) training is conducted in a similar manner at the DHEC and is open to all employees, not just those at the MFMC. More recently, patient access training was held in the Hospital for the MFMC MRs that was also attended by NICU and Labor and Delivery employees.

The Registrars must be versed in not only the Hospital's billing systems, but also in Medicare, Medicaid, and other government programs and regulations. The Registrars receive 40 weeks of in-house training at the start of their employment and have three additional trainings during the course of the year. The record does not indicate whether the MFMC MRs receive ongoing training, but it is clear that they do not have the extensive knowledge required for hospital billing and insurance processing.

¹⁰ According to the Employer, new hire orientation and HRO training at this facility can be attended by other employees throughout its Inland Northeast operation.

Neither the MFMC MRs nor the Registrars are required to have a license or certification. However, the Employer conceded that one could do the job of the other with the required training.

Based on the foregoing, I find that the employees in the petitioned-for group and the employees in the existing unit do share some of the same skills, in that they both gather and input necessary information from their respective patient groups. Although the Hospital Registrars do require more training, both groups are trained by the same Patient Access Director. Also, they attend many common trainings along with other employees in the existing unit. Thus, this is a neutral factor with regard to the finding of a showing of interest between the two groups.

Job Functions

As noted above, the MFMC MRs answer phones, check in patients, handle incoming referrals and send out and receive related documents, and schedule clinic outpatients for ultrasound appointments and other follow-up tests based on a gestation schedule.

The MRs primary duties include processing the referral forms from patients' primary OB/GYN providers and ensuring that all the necessary accompanying items have been provided with the referral (i.e., labs, chart notes, and referring party's authorizations) and sending it for nursing and then physician review. Although the MFMC MRs gather some basic insurance information from patients, they are not directly involved with patient insurance claims or billing issues. Once the referral form has been completed, the MRs then schedule the patient according to the physician's instructions.

The Petitioner argues, and I concur, that the position of MFMC MR is comparable in a limited scope to that of the Hospital's Patient Access Registrars (Registrars) who are in the existing unit. The Registrars, who are located in the DHEC a floor below the MFMC, check in and process only Hospital inpatients. In contrast to the MFMC MRs, the Registrars obtain complete demographics on a patient, as all information and authorizations necessary to bill insurance and collect payment. They also code procedures according to medical necessity for Medicare and related programs. The MFMC MRs do not collect any of this information, inasmuch as they are not directly involved in patient billing. Rather, they collect only basic information (name, address, etc.) and then send the account to the Registrars for further processing.

The Hospital Registrars work with many different types of patients, including both surgical and non-surgical; inpatient and outpatient; and emergency, in contrast to the MFMC MRs who work only with their limited demographic of high-risk and other pregnancy outpatients. The Hospital Registrars can also do some limited scheduling of patients: however, they do not schedule patients in the MFMC.

While the exact duties and skills of the MFMC MRs and the Hospital Registrars differ, I find that they essentially serve the same job function to process and admit patients to receive services from the Employer. This finding is supported, in part, by the fact that both groups are trained and evaluated by the same Hospital Patient Access Director.

Based on the totality of the evidence, I find that the similarities in the skills and work performed militates slightly in favor of finding a community of interest between the petitioned-for group and the existing unit.

Functional Integration

Although the MFMC operates as a relatively independent out-patient clinic, many of the patients who receive services at the MFMC are transferred to the Hospital as inpatients. Also, hospital patients can be referred to the MFMC for follow-up exams as outpatients. More importantly, the records and charts generated by both the MFMC and the Hospital for a particular patient are commonly shared through the electronic charting system and can be accessed by either. Thus, the MRs provide needed patient referral information to the Hospital as part of an integrated delivery of services for high-risk pregnancy patients.

Furthermore, after the MFMC MRs create an outpatient's account, that account is passed to the Hospital Registrars to manage the remainder of the account, i.e., patient billing.

Based upon the foregoing, I reject the Employer's assertion that the MFMC and the Hospital are two separate health systems and find that the MFMC is a distinct department that operates within a highly integrated acute-care facility to provide patient services. Specifically, the records created by the MFMC MRs are processed by the Registrars in the existing unit because they perform the insurance and billing for the MFMC patients. Inasmuch as this suggests an integrated operation, this factor favors finding a community of interest.

Contact and Interchange with Unit Employees

The record shows that there is some limited contact and interchange between the MFMC MRs and employees in the existing unit, particularly with the Registrars described above.

The MFMC MRs do not "float" to other departments in the hospital. In the past, before there were two MFMC MRs, Hospital personnel – usually a Registrar - would occasionally cover for the MR as needed: Registrars still provide lunchtime coverage as needed for the MFMC MRs by answering phones, taking messages, and greeting

patients: they do not complete forms or schedule exams, however. The Clinic Director or another MFMC employee can also manage the MR desk on a short-term basis.

MFMC MRs must recruit their own replacement if they take time off: however, since there are only two MRs, a replacement is generally assigned by the Employer from the Hospital's patient registration department. Accordingly, Hospital Registrars may perform the MFMC MR's duties on an interim basis.

Receptionists or Registrars from the Hospital do not generally "float" to the MFMC except as described above to fill in for a MFMC MR who is out or on vacation or even on lunch break. As noted above, the MFMC MRs do not float to the Hospital.

A Hospital Registrar could apply to be a MFMC MR but would require some additional training. In contrast, an MFMC MR would have to have extensive additional training to become a Registrar in the Hospital, since the scope of the Registrars work entails more complex medical billing and insurance issues. The record does not reveal if a transfer like this has ever occurred: however, there are only two MFMC MRs, one of whom was hired only recently.

The record does not reveal if the MFMC MRs and other employees in the existing unit share common spaces such as a lunchroom, breakroom, or locker room.

In spite of the very limited contact between the MFMC MRs and other employees in the existing unit, I find the fact that the unit Registrars regularly fill in for the MRs on an interim basis suggests that there is interchange between the two groups, and that this factor favors a finding of a community of interest.

Terms and Conditions of Employment

It is undisputed that the Employer has centralized human resources at its facility. In this regard, hiring, firing, and other human resources-related policies and decisions are ultimately made by the Employer's Human Potential (human resources) department for all employees, including the MFMC MRs.

Other support services at the facility are centralized as well: the same payroll system is used by all employees to monitor time and attendance. MFMC employees, including the MRs, use the same Human Potential office and processes as Hospital employees and share the same IT support and record-keeping system. Most regional Hospital policies apply to the employees in the MFMC, as well as benefit plans. In this regard, the Employer has standardized benefits for Hospital and MFMC employees, with the exception of training funds: the represented hospital workers' have a union training fund, while the non-represented employees have tuition reimbursement.

The MFMC operates only four days a week on clinic hours from 8:00 a.m. to 4:30 p.m. and is closed weekends and holidays, as opposed to the Hospital which operates 24/7 for 365 days a year. Accordingly, the MFMC MRs work four 8-hour shifts per week. The days of the week the MFMC is open may vary based on the outpatient schedule. The Hospital Registrars, who work in the same DHEC where the MFMC is located, also work the same weekday hours as the MFMC MRs. Other employees in the existing unit may work 8, 10, or even 12-hour shifts.

Wage rates are set at the organizational level, and the rates for Hospital employees generally differs from those of the MFMC employees. The Registrars in the existing unit are subject to a wage range that starts at \$16.55/hour and increases to \$24.85/hour according to the collective-bargaining agreement. The MFMC MRs start at \$14.01/hour and can earn up to \$20.15/hour without a fixed schedule or any established progression ladder. Also, the MRs do not earn overtime, premium pay, or shift differentials like some employees in the existing unit, since the MRs work less than 40 hours/week. Although many employees in the existing unit earn overtime, the record does not reveal if the Hospital Registrars who work in the DHEC and are part of the existing unit work more than 40 hours/week, given that they work the same hours as the employees in the MFMC.

Both the Hospital Registrars and the MFMC MRs wear business-casual clothing in lieu of scrubs or a uniform.

Based on the foregoing, I find that the wages of the MFMC MR's do not differ that significantly from that of the comparable Registrars in the existing unit. With regard to work hours, the record shows that the Registrars, who work in the same clinic building as the MFMC MRs, keep similar hours. Moreover, employees in the existing unit can work a variety of schedules based on their respective duties and department. Therefore, work hours is not a dispositive factor with regard to community of interest between the two groups.

I conclude that the similarities in terms and conditions of employment, including wages, hours, and benefits, combined with centralized human resources and record-keeping, outweigh the differences and weigh in favor of finding a sufficient community of interest between the MRs and the existing unit.

Supervision

MFMC MRs report to the Hospital's Patient Access Director, who also oversees the Registrars and other patient access employees in the existing unit. The MFMC Clinical Manager oversees the day-to-day work of the MFMC employees, including the MRs. In this regard, they regularly consult her regarding patient scheduling issues, supply requests, vacation and time off requests, and procedural matters. The Patient

Access Director prepares the MRs periodic appraisals with the input of the MFMC Clinical Manager.

I find based on the foregoing that the employees sought by the Petitioner and the employees in the existing unit share joint supervision by the Hospital's Patient Access Director.

Accordingly, based upon the stipulation of the parties and evidence in the record, particularly the shared supervision, similar skills, job functions, and terms and conditions of employment, I have concluded the voting group sought is appropriate for the self-determination election sought by the Petitioner. There are currently two employees in that group.

The parties agreed that while an in-person election is the Board's preferred method for conducting elections, in this case, the election should be held by mail ballot in light of the current circumstances due to COVID-19 and consistent with the Board's decision in *Aspirus Keweenaw*, 370 NLRB No. 45 (Nov. 9, 2020). Accordingly, I shall direct that a self-determination election be held by mail-ballot.

CONCLUSION

I have determined that the voting group sought by Petitioner is appropriate, and I shall direct a mail-ballot self-determination election among the employees in the petitioned-for voting group. Based on the entire record in this matter and in accordance with the discussion above, I conclude and find as follows:

1. The hearing officer's rulings made at the hearing are free from prejudicial error and are affirmed.
2. The parties stipulated, and I so find, that the Employer is engaged in commerce within the meaning of the Act, and it will effectuate the purposes of the Act to assert jurisdiction herein.¹¹
3. The labor organization involved claims to represent certain employees of the Employer.

¹¹ The parties stipulated to the following commerce facts:

The Employer, a Washington corporation, with an office and place of business in Spokane, Washington, is engaged in the business of operating an acute care hospital and clinic. During the last twelve months, a representative period of time, the Employer had gross revenues in excess of \$250,000, and purchased and received at its facilities within the State of Washington goods valued in excess of \$50,000 directly from suppliers outside the State of Washington

4. A question affecting commerce exists concerning the representation of certain employees of the Employer within the meaning of Section 9(c)(1) and Section 2(6) and (7) of the Act.
5. The following employees of the Employer constitute a voting group appropriate for the purposes of collective bargaining within the meaning of Section 9(b) of the Act:

All full-time, part-time, and per diem Medical Receptionists employed by the Employer in its Maternal Fetal Medicine Clinic located at 910 West 5th Avenue, Spokane, WA, excluding all other employees, guards, managers, confidential employees, and supervisors as defined in the Act.

There are approximately 2 employees in the voting group above.

DIRECTION OF ELECTION

The National Labor Relations Board will conduct a mail-ballot election among the employees in the voting group found appropriate above. Employees will vote whether or not they wish to be represented for purposes of collective bargaining by **SEIU Healthcare 1199NW**. If a majority of valid ballots are cast for SEIU Healthcare 1199NW, they will be taken to have indicated the employees desire to be included in the existing unit currently represented by the Petitioner. If a majority of valid ballots are not cast for representation, they will be taken to have indicated the employees' desire to remain unrepresented.

A. Election Details

Based on the stipulation of the parties, the election will be held by mail. At the hearing, Petitioner waived the ten days it is entitled to have the voter list described below. Region 19 will mail ballots to employees in the appropriate voting group on Tuesday, January 12, 2021 at 4:30 p.m. Voters must sign the outside of the envelope in which the ballot is returned. Any ballot received in an envelope that is not signed will be automatically void.

Those employees who believe that they are eligible to vote and did not receive a ballot in the mail by Tuesday, January 19, 2021, as well as those employees who require a duplicate ballot, should immediately contact the Region 19 office at **206-220-6300**, or our national toll-free line at **1-866-667-NLRB (1-866-667-6572)**.

Voters must return their mail ballots so that they will be received in the National Labor Relations Board, Region 19 office by 1:00 p.m. PST on Tuesday, February 2, 2021. The parties agreed that only those ballots that arrive in the Region 19 office by

the ballot due date and time will be counted and that no objections will be filed based on the foregoing. All ballots will be commingled and counted by an agent of Region 19 of the National Labor Relations Board on Thursday, February 4, 2021 at 1:00 p.m. with participants being present via electronic means. No party may make a video or audio recording or save any image of the ballot count.

B. Voting Eligibility

Eligible to vote are those in the voting group who were employed during the **payroll period ending immediately prior to the date of this Decision**, including employees who did not work during that period because they were ill, on vacation, or temporarily laid off.

Also eligible to vote are all employees in the voting group who have worked an average of four (4) hours or more per week during the 13 weeks immediately preceding the eligibility date for the election.

Employees engaged in an economic strike, who have retained their status as strikers and who have not been permanently replaced, are also eligible to vote. In addition, in an economic strike that commenced less than 12 months before the election date, employees engaged in such strike who have retained their status as strikers but who have been permanently replaced, as well as their replacements, are eligible to vote.

Ineligible to vote are (1) employees who have quit or been discharged for cause since the designated payroll period; (2) striking employees who have been discharged for cause since the strike began and who have not been rehired or reinstated before the election date; and (3) employees who are engaged in an economic strike that began more than 12 months before the election date and who have been permanently replaced.

C. Voter List

As required by Section 102.67(1) of the Board's Rules and Regulations, the Employer must provide the Regional Director and parties named in this decision a list of the full names, work locations, shifts, job classifications, and contact information (including home addresses, available personal email addresses, and available home and personal cell telephone numbers) of all eligible voters.

The Petitioner waived the ten days that it is entitled to have the voter list. To be timely filed and served, the list must be *received* by the Regional Director and the parties by **Thursday, January 7, 2021**. The list must be accompanied by a certificate of service showing service on all parties. **The region will no longer serve the voter list.**

Unless the Employer certifies that it does not possess the capacity to produce the list in the required form, the list must be provided in a table in a Microsoft Word file (.doc or docx) or a file that is compatible with Microsoft Word (.doc or docx). The first column of the list must begin with each employee's last name and the list must be alphabetized (overall or by department) by last name. Because the list will be used during the election, the font size of the list must be the equivalent of Times New Roman 10 or larger. That font does not need to be used but the font must be that size or larger. A sample, optional form for the list is provided on the NLRB website at www.nlr.gov/what-we-do/conduct-elections/representation-case-rules-effective-april-14-2015.

When feasible, the list shall be filed electronically with the Region and served electronically on the other parties named in this decision. The list may be electronically filed with the Region by using the E-filing system on the Agency's website at www.nlr.gov. Once the website is accessed, click on **E-File Documents**, enter the NLRB Case Number, and follow the detailed instructions.

Failure to comply with the above requirements will be grounds for setting aside the election whenever proper and timely objections are filed. However, the Employer may not object to the failure to file or serve the list within the specified time or in the proper format if it is responsible for the failure.

No party shall use the voter list for purposes other than the representation proceeding, Board proceedings arising from it, and related matters.

D. Posting of Notices of Election

Pursuant to Section 102.67(k) of the Board's Rules, the Employer must post copies of the Notice of Election accompanying this Decision in conspicuous places, including all places where notices to employees in the unit found appropriate are customarily posted. The Notice must be posted so all pages of the Notice are simultaneously visible. In addition, if the Employer customarily communicates electronically with some or all of the employees in the unit found appropriate, the Employer must also distribute the Notice of Election electronically to those employees. The Employer must post copies of the Notice at least 3 full working days prior to 12:01 a.m. of the day of the election and copies must remain posted until the end of the election. For purposes of posting, working day means an entire 24-hour period excluding Saturdays, Sundays, and holidays. However, a party shall be estopped from objecting to the nonposting of notices if it is responsible for the nonposting, and likewise shall be estopped from objecting to the nondistribution of notices if it is responsible for the nondistribution.

Failure to follow the posting requirements set forth above will be grounds for setting aside the election if proper and timely objections are filed.

RIGHT TO REQUEST REVIEW

Pursuant to Section 102.67 of the Board's Rules and Regulations, a request for review may be filed with the Board at any time following the issuance of this Decision until 10 days after a final disposition of the proceeding by the Regional Director. Accordingly, a party is not precluded from filing a request for review of this decision after the election on the grounds that it did not file a request for review of this Decision prior to the election.

A request for review may be E-Filed through the Agency's website and may not be filed by facsimile. To E-File the request for review, go to www.nlr.gov, select E-File Documents, enter the NLRB Case Number, and follow the detailed instructions.¹² If not E-Filed, the request for review should be addressed to the Executive Secretary, National Labor Relations Board, 1015 Half Street SE, Washington, DC 20570-0001. A party filing a request for review must serve a copy of the request on the other parties and file a copy with the Regional Director. A certificate of service must be filed with the Board together with the request for review. The request for review must conform to the requirements of Section 102.67 of the Board's Rules and Regulations.

Neither the filing of a request for review nor the Board's granting a request for review will stay the election in this matter unless specifically ordered by the Board. If a request for review of a pre-election decision and direction of election is filed within 10 business days after issuance of the decision and if the Board has not already ruled on

¹² On October 21, 2019, the General Counsel (GC) issued Memorandum GC 20-01, informing the public that Section 102.5(c) of the Board's Rules and Regulations mandates the use of the E-filing system for the submission of documents by parties in connection with the unfair labor practice or representation cases processed in Regional offices. The E-Filing requirement went into immediate effect on October 21, 2019, and the 90-day grace period that was put into place expired on January 21, 2020. If not E-Filed, the request for review should be addressed to the Executive Secretary, National Labor Relations Board, 1015 Half Street SE, Washington, DC 20570-0001, and must be accompanied by a statement explaining the circumstances concerning not having access to the Agency's E-Filing system or why filing electronically would impose an undue burden.

the request and therefore the issue under review remains unresolved, all ballots will be impounded. Nonetheless, parties retain the right to file a request for review at any subsequent time until 10 business days following final disposition of the proceeding, but without automatic impoundment of ballots.

Dated at Seattle, Washington on January 5, 2021.

Ronald K. Hooks

Ronald K. Hooks, Regional Director,
National Labor Relations Board, Region 19
915 2nd Ave, Suite 2948
Seattle, WA 98174-1006



United States of America
National Labor Relations Board
NOTICE OF ELECTION



19-RC-268298

PURPOSE OF ELECTION: This election is to determine the representative, if any, desired by the eligible employees for purposes of collective bargaining with their employer. (See VOTING GROUP in this Notice of Election for description of eligible employees.) A majority of the valid ballots cast will determine the results of the election. Only one valid representation election may be held in a 12-month period.

SECRET BALLOT: The election will be by secret ballot carried out through the U.S. mail under the supervision of the Regional Director of the National Labor Relations Board (NLRB). A sample of the official ballot is shown on the next page of this Notice. Voters will be allowed to vote without interference, restraint, or coercion. Employees eligible to vote will receive in the mail *Instructions to Employees Voting by United States Mail*, a ballot, a blue envelope, and a yellow self-addressed envelope needing no postage.

ELIGIBILITY RULES: Employees eligible to vote are those described under the VOTING GROUP on the next page and include employees who did not work during the designated payroll period because they were ill or on vacation or temporarily laid off. Employees who have quit or been discharged for cause since the designated payroll period and who have not been rehired or reinstated prior to the date of this election are not eligible to vote.

CHALLENGE OF VOTERS: An agent of the Board or an authorized observer may question the eligibility of a voter. Such challenge must be made at the time the ballots are counted.

AUTHORIZED OBSERVERS: Each party may designate an equal number of observers, this number to be determined by the NLRB. These observers (a) act as checkers at the counting of ballots; (b) assist in identifying voters; (c) challenge voters and ballots; and (d) otherwise assist the NLRB.

METHOD AND DATE OF ELECTION

The election will be conducted by United States mail. The mail ballots will be mailed to employees employed in the appropriate collective-bargaining unit. At 4:30 PM on Tuesday, January 12, 2021, ballots will be mailed to voters from the National Labor Relations Board, Region 19, 915 2nd Ave Ste 2948, Seattle, WA 98174-1006. Voters must sign the outside of the envelope in which the ballot is returned. Any ballot received in an envelope that is not signed will be automatically void.

Those employees who believe that they are eligible to vote and did not receive a ballot in the mail by Tuesday, January 19, 2021, should communicate immediately with the National Labor Relations Board by either calling the Region 19 Office at (206)220-6300 or our national toll-free line at 1-844- 762-NLRB (1-844-762-6572).

All ballots will be commingled and counted by a designated Board Agent of the National Labor Relations Board at 1:00 PM PST on Thursday, February 4, 2021, likely via a videoconference to be arranged by Region 19. In order to be valid and counted, the returned ballots must be received in the Region 19 Office, 2948 Jackson Federal Building, 915 Second Ave, Seattle, WA 98174-1009 by 1:00 PM PST on Tuesday, February 2, 2021.

WARNING: This is the only official notice of this election and must not be defaced by anyone. Any markings that you may see on any sample ballot or anywhere on this notice have been made by someone other than the National Labor Relations Board, and have not been put there by the National Labor Relations Board. The National Labor Relations Board is an agency of the United States Government, and does not endorse any choice in the election.



United States of America
National Labor Relations Board
NOTICE OF ELECTION



VOTING GROUP

EMPLOYEES ELIGIBLE TO VOTE:

Those eligible to vote are: All full-time, part-time, and per diem Medical Receptionists employed by the Employer in its Maternal Fetal Medicine Clinic located at 910 West 5th Avenue, Spokane, WA who were employed during the payroll period ending immediately prior to the date of January 5, 2021 Decision and Direction of Election.

EMPLOYEES NOT ELIGIBLE TO VOTE:

Those not eligible to vote are: All other employees, guards, managers, confidential employees and supervisors as defined in the Act.

Also eligible to vote are all employees in the voting group who have worked an average of four (4) hours or more per week during the 13 weeks immediately preceding the eligibility date for the election.

Note: If a majority of valid ballots are cast for SEIU HealthCare 1199NW, they will be taken to have indicated the employees desire to be included in the existing unit currently represented by the Petitioner. If a majority of valid ballots are not cast for representation, they will be taken to have indicated the employees' desire to remain unrepresented.



UNITED STATES OF AMERICA
National Labor Relations Board

19-RC-268298



OFFICIAL SECRET BALLOT

For certain employees of
MultiCare Health System dba Deaconess Hospital

Do you wish to be represented for purposes of collective bargaining by
SEIU HealthCare 1199NW?

MARK AN "X" IN THE SQUARE OF YOUR CHOICE

YES

☐

Sample

NO

☐

DO NOT SIGN OR WRITE YOUR NAME OR INCLUDE OTHER MARKINGS THAT WOULD REVEAL YOUR IDENTITY. MARK AN "X" IN THE SQUARE OF YOUR CHOICE ONLY. If you make markings inside, or anywhere around, more than one square, you may request a new ballot by referring to the enclosed instructions. If you submit a ballot with markings inside, or anywhere around, more than one square, your ballot will not be counted.

The National Labor Relations Board does not endorse any choice in this election. Any markings that you may see on any sample ballot have not been put there by the National Labor Relations Board.



United States of America
National Labor Relations Board
NOTICE OF ELECTION



RIGHTS OF EMPLOYEES - FEDERAL LAW GIVES YOU THE RIGHT TO:

- Form, join, or assist a union
- Choose representatives to bargain with your employer on your behalf
- Act together with other employees for your benefit and protection
- Choose not to engage in any of these protected activities
- In a State where such agreements are permitted, the Union and Employer may enter into a lawful union-security agreement requiring employees to pay periodic dues and initiation fees. Nonmembers who inform the Union that they object to the use of their payments for nonrepresentational purposes may be required to pay only their share of the Union's costs of representational activities (such as collective bargaining, contract administration, and grievance adjustment).

It is the responsibility of the National Labor Relations Board to protect employees in the exercise of these rights.

The Board wants all eligible voters to be fully informed about their rights under Federal law and wants both Employers and Unions to know what is expected of them when it holds an election.

If agents of either Unions or Employers interfere with your right to a free, fair, and honest election the election can be set aside by the Board. When appropriate, the Board provides other remedies, such as reinstatement for employees fired for exercising their rights, including backpay from the party responsible for their discharge.

The following are examples of conduct that interfere with the rights of employees and may result in setting aside of the election:

- Threatening loss of jobs or benefits by an Employer or a Union
- Promising or granting promotions, pay raises, or other benefits, to influence an employee's vote by a party capable of carrying out such promises
- An Employer firing employees to discourage or encourage union activity or a Union causing them to be fired to encourage union activity
- Making campaign speeches to assembled groups of employees on company time where attendance is mandatory, within the 24-hour period before the mail ballots are dispatched
- Incitement by either an Employer or a Union of racial or religious prejudice by inflammatory appeals
- Threatening physical force or violence to employees by a Union or an Employer to influence their votes

The National Labor Relations Board protects your right to a free choice.

Improper conduct will not be permitted. All parties are expected to cooperate fully with this Agency in maintaining basic principles of a fair election as required by law.

Anyone with a question about the election may contact the NLRB Office at (206)220-6300 or visit the NLRB website www.nlr.gov for assistance.

United States of America
National Labor Relations Board

**Instructions to Eligible Employees Voting
By United States Mail**



INSTRUCTIONS

1. MARK YOUR BALLOT IN SECRET BY PLACING AN X IN THE APPROPRIATE BOX. DO NOT SIGN OR WRITE YOUR NAME OR INCLUDE OTHER MARKINGS THAT WOULD REVEAL YOUR IDENTITY.
2. IF YOU SUBMIT A BALLOT WITH MARKINGS INSIDE, OR ANYWHERE AROUND, MORE THAN ONE SQUARE, YOUR BALLOT WILL NOT BE COUNTED. YOU MAY REQUEST A NEW BALLOT BY CALLING THE REGIONAL OFFICE AT THE NUMBER BELOW.
3. IT IS IMPORTANT TO MAINTAIN THE SECRECY OF YOUR BALLOT. DO NOT SHOW YOUR BALLOT TO ANYONE AFTER YOU HAVE MARKED IT.
4. PUT YOUR BALLOT IN THE BLUE ENVELOPE AND SEAL THE ENVELOPE.
5. PUT THE BLUE ENVELOPE CONTAINING THE BALLOT INTO THE YELLOW ADDRESSED RETURN ENVELOPE.
6. SIGN THE BACK OF THE YELLOW RETURN ENVELOPE IN THE SPACE PROVIDED. TO BE COUNTED, THE YELLOW RETURN ENVELOPE MUST BE SIGNED.
7. DO NOT PERMIT ANY PARTY – THE EMPLOYER, THE UNION(S), OR THEIR REPRESENTATIVES, OR AN EMPLOYEE-PETITIONER – TO HANDLE, COLLECT, OR MAIL YOUR BALLOT.
8. MAIL THE BALLOT IMMEDIATELY. NO POSTAGE IS NECESSARY. For further information, call the Regional Office at: **206-220-6300**

TO BE COUNTED, YOUR BALLOT MUST REACH THE REGIONAL OFFICE

BY 1:00 PM PST on Tuesday, February 2, 2021

RIGHTS OF EMPLOYEES

Under the National Labor Relations Act, employees have the right:

- To self-organization
- To form, join, or assist labor organizations
- To bargain collectively through representatives of their own choosing
- To act together for the purposes of collective bargaining or other mutual aid or protection
- To refuse to do any or all of these things unless the union and employer, in a state where such agreements are permitted, enter into a lawful union-security agreement requiring employees to pay periodic dues and initiation fees. Nonmembers who inform the union that they object to the use of their payments for non representational purposes may be required to pay only their share of the union's costs of representational activities (such as collective bargaining, contract administration, and grievance adjustment).

It is the responsibility of the National Labor Relations Board to protect employees in the exercise of these rights.

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If agents of either unions or employers interfere with your right to a free, fair, and honest election, the election can be set aside by the Board. Where appropriate, the Board provides other remedies, such as reinstatement for employees fired for exercising their rights, including backpay from the party responsible for their discharge.

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- Incitement by either an employer or a union of racial or religious prejudice by inflammatory appeals
- Threatening physical force or violence to employees by a union or an employer to influence their votes.

The National Labor Relations Board protects your right to a free choice

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NATIONAL LABOR RELATIONS BOARD
an agency of the
UNITED STATES GOVERNMENT